

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Rely on Your Beliefs Fund

ADDRESS (number and street)

209 Pennsylvania Avenue, SE

Check if different
than previously
reported. (ACC)

Washington

DC

20003

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00344648

3. IS THIS
REPORTNEW
(N)**OR**AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

April 15
Quarterly Report(Q1)July 15
Quarterly Report(Q2)October 15
Quarterly Report(Q3)January 31
Quarterly Report(YE)July 31 Mid-Year
Report(Non-election
Year Only) (MY)Termination Report
(TER)(b) Monthly
Report
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)
(Non-Election
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)
(Non-Election
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

in the
State of

5. Covering Period

07

01

2007

through

07

31

2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Paul Kilgore

Signature of Treasurer

Electronically Filed by Paul Kilgore

Date

08

21

2007

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Rely on Your Beliefs Fund

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
0	7	3	1	2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2007		240493.94
(b) Cash on Hand at Beginning of Reporting Period	302297.52	
(c) Total Receipts (from Line 19)	18000.00	504450.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	320297.52	744943.94
7. Total Disbursements (from Line 31)	32345.29	456991.71
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	287952.23	287952.23
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name
Rely on Your Beliefs Fund

Report Covering the Period:

From:

M M D D Y Y W Y
0 7 0 1 2 0 0 7

To:

M M D D Y Y W Y
0 7 3 1 2 0 0 7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	3000.00	36950.00
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized	3000.00	36950.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➤	0.00	0.00
(b) Political Party Committees	15000.00	457500.00
(c) Other Political Committees (such as PACs)	18000.00	494450.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ➤		
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	10000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	18000.00	504450.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	18000.00	504450.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		0.00	0.00
(i) Federal Share.....			
(ii) Non-Federal Share.....		0.00	0.00
(b) Other Federal Operating Expenditures.....		27345.29	196432.64
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....		27345.29	196432.64
22. Transfers to Affiliated/Other Party Committees.....		0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		5000.00	260359.07
24. Independent Expenditure (use Schedule E)		0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....		0.00	0.00
26. Loan Repayments Made.....		0.00	0.00
27. Loans Made.....		0.00	0.00
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees		0.00	0.00
(b) Political Party Committees		0.00	0.00
(c) Other Political Committees (such as PACs)		0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))		0.00	0.00
29. Other Disbursements.....		0.00	200.00
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share		0.00	0.00
(ii) "Levin" Share		0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds		0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....		0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..		32345.29	456991.71
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....		32345.29	456991.71

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	18000.00	494450.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	18000.00	494450.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	27345.29	196432.64
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	27345.29	196432.64

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 / 15

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Rely on Your Beliefs Fund

Full Name (Last, First, Middle Initial)

A. Abbott Laboratories PAC

Mailing Address 1399 New York Ave NW
Suite 200

City State Zip Code
Washington DC 20005-4732

FEC ID number of contributing
federal political committee. **C** C00040279

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 9 / 2 0 0 7

Transaction ID: 70719.C582

Amount of Each Receipt this Period

2500.00

Receipt

Full Name (Last, First, Middle Initial)

B. American Gas Association PAC

Mailing Address 400 N Capitol St NW

City State Zip Code
Washington DC 20001-1511

FEC ID number of contributing
federal political committee. **C** C00007450

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 3 1 / 2 0 0 7

Transaction ID: 70817.C586

Amount of Each Receipt this Period

2500.00

Receipt

Full Name (Last, First, Middle Initial)

C. General Dynamics PAC

Mailing Address 2941 Fairview Park Drive
Suite 100

City State Zip Code
Falls Church VA 22042

FEC ID number of contributing
federal political committee. **C** C00078451

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 3 1 / 2 0 0 7

Transaction ID: 70817.C585

Amount of Each Receipt this Period

5000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

10000.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 15

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Rely on Your Beliefs Fund

A. Full Name (Last, First, Middle Initial) General Electric Company PAC Mailing Address 1299 Pennsylvania Avenue, NW Suite 1100 W City Washington State DC Zip Code 20004 FEC ID number of contributing federal political committee. C C00024869 Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 3 1 / 2 0 0 7 Transaction ID: 70817.C587 Amount of Each Receipt this Period 2500.00 Receipt
B. Full Name (Last, First, Middle Initial) Honeywell International PAC Mailing Address 101 Constitution Ave NW Ste 500W Suite 500W City Washington State DC Zip Code 20001-2177 FEC ID number of contributing federal political committee. C C00096156 Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 3 1 / 2 0 0 7 Transaction ID: 70817.C588 Amount of Each Receipt this Period 2500.00 Receipt

SUBTOTAL of Receipts This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

15000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 15

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Rely on Your Beliefs Fund

A. Full Name (Last, First, Middle Initial)

Vicki Hart

Mailing Address 3823 Fordham Road, NW.

City State Zip Code
 Washington DC 20016

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hart Health Strategies

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 3 1 / 2 0 0 7

Transaction ID: 70817.C584

Amount of Each Receipt this Period

1500.00

Receipt

B. Full Name (Last, First, Middle Initial)

Letitia White

Mailing Address 525 9th St NW Ste 800
 Suite 800

City State Zip Code
 Washington DC 20004-2155

FEC ID number of contributing
federal political committee.

C

Name of Employer
Innovative Federal Strategies

Occupation
Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 3 1 / 2 0 0 7

Transaction ID: 70817.C583

Amount of Each Receipt this Period

1500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

3000.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Rely on Your Beliefs Fund

Full Name (Last, First, Middle Initial)

A. Comcast

Mailing Address PO Box 3005

City
Southeastern

State
PA

Zip Code
19398-3005

Purpose of Disbursement
PAC INTERNET EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70719.E976

Date of Disbursement

/

Amount of Each Disbursement this Period

46.42

PAC INTERNET EXPENSE

Full Name (Last, First, Middle Initial)

B. UPS

Mailing Address PO Box 72470244

City
Philadelphia

State
PA

Zip Code
19170-0001

Purpose of Disbursement
PAC SHIPPING EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70711.E953

Date of Disbursement

/

Amount of Each Disbursement this Period

18.73

PAC SHIPPING EXPENSE

Full Name (Last, First, Middle Initial)

C. UPS

Mailing Address PO Box 72470244

City
Philadelphia

State
PA

Zip Code
19170-0001

Purpose of Disbursement
PAC SHIPPING EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70719.E978

Date of Disbursement

/

Amount of Each Disbursement this Period

148.56

PAC SHIPPING EXPENSE

SUBTOTAL of Disbursements This Page (optional)

213.71

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 10 / 15

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Rely on Your Beliefs Fund

Full Name (Last, First, Middle Initial)

A. UPS

Mailing Address PO Box 72470244

City Philadelphia State PA Zip Code 19170-0001

Purpose of Disbursement
PAC SHIPPING EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70817.E987

Date of Disbursement

07 / 31 / 2007

Amount of Each Disbursement this Period

18.73

PAC SHIPPING EXPENSE

Full Name (Last, First, Middle Initial)

B. GMD Technologies

Mailing Address 3210 S 28th St
Apt 302

City Alexandria State VA Zip Code 22302-1326

Purpose of Disbursement
PAC TECHNOLOGY SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70817.E982

Date of Disbursement

07 / 31 / 2007

Amount of Each Disbursement this Period

576.32

PAC TECHNOLOGY SERVICES

Full Name (Last, First, Middle Initial)

C. McKenna Long & Aldridge

Mailing Address 303 Peachtree St NE
Suite 5300

City Atlanta State GA Zip Code 30308-3265

Purpose of Disbursement
PAC COMPLIANCE EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70719.E977

Date of Disbursement

07 / 19 / 2007

Amount of Each Disbursement this Period

231.85

PAC COMPLIANCE EXPENSE

SUBTOTAL of Disbursements This Page (optional)

826.90

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 / 15

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Rely on Your Beliefs Fund

Full Name (Last, First, Middle Initial)

A. Thompson Communications

Mailing Address P.O. Box 5

City
Marshfield

State
MO

Zip Code
65706-0005

Purpose of Disbursement
PAC STAFFING SERVICE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70719.E970

Date of Disbursement

/ /

Amount of Each Disbursement this Period

11226.71

PAC STAFFING SERVICE

Full Name (Last, First, Middle Initial)

B. Roll Call

Mailing Address 50 F St NW Ste 700

City
Washington

State
DC

Zip Code
20001-1530

Purpose of Disbursement
PAC SUBSCRIPTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70719.E973

Date of Disbursement

/ /

Amount of Each Disbursement this Period

435.00

PAC SUBSCRIPTION

Full Name (Last, First, Middle Initial)

C. Four Seasons Hotel

Mailing Address 2800 Pennsylvania Ave NW

City
Washington

State
DC

Zip Code
20007-3717

Purpose of Disbursement
PAC CONGRESSIONAL LUNCHEON

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70719.E972

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1980.00

PAC CONGRESSIONAL LUNCHEON

SUBTOTAL of Disbursements This Page (optional)

13641.71

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Rely on Your Beliefs Fund

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 1270

City
Newark

State
NJ

Zip Code
07101-1270

Purpose of Disbursement
SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 70817.E984

Date of Disbursement

07 / 31 / 2007

Amount of Each Disbursement this Period

3130.51

SEE BELOW

Full Name (Last, First, Middle Initial)

B. Ruths Chris Steakhouse

Mailing Address 1801 Connecticut Ave NW

City
Washington

State
DC

Zip Code
20009-5700

Purpose of Disbursement
PAC FUNDRAISING DINNER

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 70817.E985

Date of Disbursement

07 / 31 / 2007

Amount of Each Disbursement this Period

3130.51

[MEMO ITEM]

MEMO: PAC FUNDRAISING DIN-
NER

Full Name (Last, First, Middle Initial)

C. Lagana Printing

Mailing Address 513 C St NE

City
Washington

State
DC

Zip Code
20002-5809

Purpose of Disbursement
PAC PRINTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 70719.E974

Date of Disbursement

07 / 19 / 2007

Amount of Each Disbursement this Period

211.50

PAC PRINTING

SUBTOTAL of Disbursements This Page (optional)

3342.01

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 13 / 15

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Rely on Your Beliefs Fund

Full Name (Last, First, Middle Initial)

A. Congressional Quarterly

Mailing Address 1255 22nd Street, NW

City
Washington

State
DC

Zip Code
20037-

Purpose of Disbursement
PAC SUBSCRIPTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70817.E983

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3701.25

PAC SUBSCRIPTION

Full Name (Last, First, Middle Initial)

B. Keri Ann Hayes

Mailing Address 202 11th St NE

City
Washington

State
DC

Zip Code
20002-6218

Purpose of Disbursement
PAC TAXI EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70817.E986

Date of Disbursement

/ /

Amount of Each Disbursement this Period

48.00

PAC TAXI EXPENSE

Full Name (Last, First, Middle Initial)

C. Jay Perron

Mailing Address 1441 Constitution Ave NE

City
Washington

State
DC

Zip Code
20002-6421

Purpose of Disbursement
PAC TAXI EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70719.E971

Date of Disbursement

/ /

Amount of Each Disbursement this Period

86.00

PAC TAXI EXPENSE

SUBTOTAL of Disbursements This Page (optional)

3835.25

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 14 / 15

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Rely on Your Beliefs Fund

Full Name (Last, First, Middle Initial)

A. Professional Data Services, Inc.

Mailing Address 337 S Milledge Ave Ste 101

City Athens State GA Zip Code 30605-1083

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70817.E980

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3000.00

COMPLIANCE CONSULTING

Full Name (Last, First, Middle Initial)

B. Dan Williams

Mailing Address 209 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1107

Purpose of Disbursement
PAC TELEPHONE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70719.E975

Date of Disbursement

/ /

Amount of Each Disbursement this Period

118.17

PAC TELEPHONE

Full Name (Last, First, Middle Initial)

C. Dan Williams

Mailing Address 209 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1107

Purpose of Disbursement
PAC OFFICE RENT AND PHONES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70817.E981

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2273.48

PAC OFFICE RENT AND PHONES

SUBTOTAL of Disbursements This Page (optional)

5391.65

TOTAL This Period (last page this line number only)

27251.23

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 / 15

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Rely on Your Beliefs Fund

Full Name (Last, First, Middle Initial)

A. Committee to Elect McHugh

Mailing Address 228 S. Washington Street, Ste. 115

City
AlexandriaState
VAZip Code
22314-

Purpose of Disbursement

Candidate Name
JOHN M MCHUGHCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 23

Transaction ID: 70719.E979

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	9		2	0	0	7

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

5000.00